

# HASP Template

UNITED STATES DEPARTMENT OF AGRICULTURAL  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

## **HASP Section 6 Medical Surveillance**

### **Requirements**

#### **6.1 PURPOSE**

The Occupational Medical Monitoring Program is designed for the protection of APHIS employees who are exposed to hazardous chemicals, biologicals, radioactive materials, and hazards such as noise, which could be harmful to their health and welfare. Occupational medical monitoring specified under the program is an added safeguard and does not replace the need to work in an environment which limits exposure to the hazardous material.

Medical monitoring is done specifically to determine the exposure risks to a hazardous material or other inordinate hazards and should not be used by employees in lieu of a complete physical examination by a physician. These examinations also do not replace the use of an industrial hygienist who may be needed to determine levels of exposure and recommend methods of limiting exposure to the hazard.

Medical monitoring in itself does not prevent illness or injury, though it may contribute directly to prevention. In most situations, health monitoring is performed to secure maximum preventive benefits at minimal cost and inconvenience. As with all medical monitoring, the opportunity for education of the employee is one of the major benefits.

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## 6.2 Application

All personnel who perform field activities must participate in a medical surveillance program required by 29 CFR 1910.120.

Personnel performing work must have received a medical baseline or follow-up examination within the past 12 months.

A physician's statement declaring that each field team member is medically qualified to perform hazardous waste-related activities must be kept by the Incident Safety Officer. At a minimum, The Incident Safety Officer will have a Form 5-R, Self-Certification Medical Statement (See Appendix 6 A) for each employee/contractor performing work at a deployment.

Subcontractor employees must participate in their employer's medical monitoring program. If the employer does not normally perform medical monitoring, the Medical Surveillance portion of this HASP will be provided to them so they can develop a medical program equivalent to those provided to APHIS personnel.

The Operation Section Chief, with the Incident Safety Officer's assistance will require that all relevant contractors show proof of participation in a medical monitoring program and provide appropriate documentation. Documentation shall include a physician's statement declaring all contract employees are medically qualified to perform hazardous waste work.

Verification of medical qualification will be provided to the Incident Safety Officer.

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The Incident Safety Officer will keep a log of personnel meeting appropriate medical qualifications for fieldwork.

- **Initial Exam.** All responders have received an initial examination through FOH.
- **Periodic Exam.** All responders have received an annual examination through FOH.
- **Termination Examination.** All responders will have a termination examination through FOH.
- **Respirator Examination.** No responder will wear a respirator unless he/she has been trained, been fit-tested, and certified as medically fit to wear a respirator

Also, medical surveillance for specific hazards may be called for depending upon the situation. The Incident Safety Officer will need to determine what compounds APHIS personnel may encounter and notify the Medical Officer. Together, the Incident Safety Officer and Medical Officer will determine what Medical Surveillance is needed. Examples of these specific hazards can include:

**Hazardous Dusts** - Employees exposed to dust such as cotton dust, asbestos, etc., should obtain professional guidance to determine the necessity for chest x-rays and pulmonary function tests.

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**Organophosphate or Carbamate Exposure** - Routine blood cholinesterase determinations will be performed.

See appendix 6-A for the cholinesterase testing program

**Occupational Bacterial and Viral Diseases** - Periodic serological tests should be performed to determine blood titers. Psittacosis and Brucellosis are good examples of this type of monitoring.

See appendix 6-B for the Psittacosis testing program

See appendix 6-C for the Brucellosis testing program

See appendix 6-D for the Tuberculosis testing program

**Chemical Exposures** - The presence of certain chemicals can be specifically detected in the blood stream. However, for those that cannot be detected, it is essential that the employee receive a battery of blood tests to evaluate kidney, liver, and endocrine metabolic functions.

**Chemical Weapon (Nerve Agent) Exposure-** Routine blood cholinesterase determinations will also be used for these agents.

The latest edition of the American Congress of Governmental Industrial Hygienist's TLV's and BEI's (Biological Exposure Indices) guide would be consulted for recommendation on exposure indices for specific agents.

Medical Recordkeeping. FOH will retain all records of examinations and other medical related documentation.

Monitoring. Any personnel monitoring results, laboratory reports, calculations, and air sampling data sheets are part of the exposure record.

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These records will be kept (by FOH) in accordance with 29 CFR  
1910.120.

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